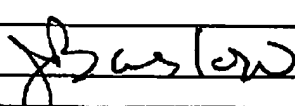


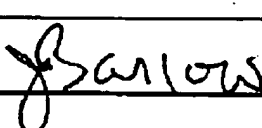
This Form Based on PTO/SB/21

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/925,021	
	Filing Date	8/9/2001	
	First Named Inventor	SAKAI	
	Group Art Unit	2856	
	Examiner Name	Chapman	
		Attorney Docket Number	01-186

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Petition <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund Remarks	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; text-align: center;">RECEIVED CENTRAL FAX CENTER SEP 11 2003</div>

OFFICIAL

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Posz & Bethards, PLC
Signature	
Date	10 September 2003

CERTIFICATE OF TRANSMISSION	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO (Fax No. (Fax No. 703-872-9319) on the date that appears below.	
Type or printed name	
Signature	
Date: 10 September 2003	